2025 COBRA Rates Rates for January 1, 2025 to December 31, 2025

| | Monthly COBRA Premium | | |
|--------------------------------|-------------------------------|--|-----------------------------|
| Plan Name Anthem Select HMO | Individual Only \$1,281.78 | Individual + 1 Dependent \$2,563.57 | Family \$3,332.64 |
| Anthem Traditional HMO | \$1,530.41 | \$3,060.82 | \$3,979.06 |
| Blue Shield Access+ HMO | \$1,193.57 | \$2,387.15 | \$3,103.29 |
| Blue Shield EPO | \$1,193.57 | \$2,387.15 | \$3,103.29 |
| Blue Shield Trio HMO | \$1,157.49 | \$2,314.97 | \$3,009.46 |
| Kaiser HMO | \$1,135.16 | \$2,270.32 | \$2,951.41 |
| PERS Gold PPO | \$1,033.97 | \$2,067.95 | \$2,688.33 |
| PERS Platinum PPO | \$1,505.62 | \$3,011.24 | \$3,914.62 |
| PORAC | \$994.50 | \$2,262.36 | \$2,832.54 |
| Western Health Advantage HMO | \$932.56 | \$1,865.11 | \$2,424.64 |
| UnitedHealthcare HMO | \$1,208.27 | \$2,416.54 | \$3,141.51 |
| | | | |
| Delta Dental PPO | \$59.37 | \$100.94 | \$154.39 |
| EyeMed Vision | \$6.87 | \$13.75 | \$19.25 |
| Optum Chiropractic | \$6.44 | \$6.44 | \$6.44 |